

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SMC		11/18/99
O.I.P.E. CLASSIFIER			59
FORMALITY REVIEW	MP	NUMBER 108031	122
	11		DEC 10

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
—	(Through numeral) Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Final	Original	Date
1	✓	✓	✓/✓/✓
2	✓	✓	✓/✓/✓
3	✓	✓	✓/✓/✓
4	✓	✓	✓/✓/✓
5	✓	✓	✓/✓/✓
6	✓	✓	✓/✓/✓
7	✓	✓	✓/✓/✓
8	✓	✓	✓/✓/✓
9	✓	✓	✓/✓/✓
10	✓	✓	✓/✓/✓
11	✓	✓	✓/✓/✓
12	✓	✓	✓/✓/✓
13	✓	✓	✓/✓/✓
14	✓	✓	✓/✓/✓
15	✓	✓	✓/✓/✓
16	✓	✓	✓/✓/✓
17	✓	✓	✓/✓/✓
18	✓	✓	✓/✓/✓
19	✓	✓	✓/✓/✓
20	✓	✓	✓/✓/✓
21	✓	✓	✓/✓/✓
22	✓	✓	✓/✓/✓
23	✓	✓	✓/✓/✓
24	✓	✓	✓/✓/✓
25	✓	✓	✓/✓/✓
26	✓	✓	✓/✓/✓
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31	✓	✓	✓/✓/✓
32	✓	✓	✓/✓/✓
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34	✓	✓	✓/✓/✓
35	✓	✓	✓/✓/✓
36	✓	✓	✓/✓/✓
37	✓	✓	✓/✓/✓
38	✓	✓	✓/✓/✓
39	✓	✓	✓/✓/✓
40	✓	✓	✓/✓/✓
41	✓	✓	✓/✓/✓
42	✓	✓	✓/✓/✓
43	✓	✓	✓/✓/✓
44	✓	✓	✓/✓/✓
45	✓	✓	✓/✓/✓
46	✓	✓	✓/✓/✓
47	✓	✓	✓/✓/✓
48	✓	✓	✓/✓/✓
49	✓	✓	✓/✓/✓
50	✓	✓	✓/✓/✓

Claim	Final	Original	Date
51	✓	✓	✓/✓/✓
52	✓	✓	✓/✓/✓
53	✓	✓	✓/✓/✓
54	✓	✓	✓/✓/✓
55	✓	✓	✓/✓/✓
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)